

UNITED STATES COURT OF APPEALS FOR THE FIRST CIRCUIT

Case name Artis, et al. v. New England Compounding Pharmacy, Inc., et al.District Court Case No. 1:13-MD-2419-FDS District of PLEASE SELECTDate Notice of Appeal filed August 9, 2013 Court of Appeals Case No. 13-2007Form filed on behalf of Appellants

TRANSCRIPT REPORT

Transcript Not Necessary for this Appeal Transcript Already Filed in District Court. List each transcript by docket entry number and date and type of proceeding (attach separate page if necessary)

TRANSCRIPT ORDER

Name of Court Reporter Valerie O'HaraPhone Number of Reporter N/A; vaohara@gmail.comA. ☒ **This constitutes an order of the transcript of the following proceedings [check appropriate box(es) and indicate dates of hearing(s)]:**

PROCEEDING(S)	HEARING DATE(S)
<input type="checkbox"/> Jury Voir Dire	<u> </u>
<input type="checkbox"/> Opening Statement (plaintiff)	<u> </u>
<input type="checkbox"/> Opening Statement (defendant)	<u> </u>
<input type="checkbox"/> Trial	<u> </u>
<input type="checkbox"/> Closing Argument (plaintiff)	<u> </u>
<input type="checkbox"/> Closing Argument (defendant)	<u> </u>
<input type="checkbox"/> Findings of Fact/Conclusions of Law	<u> </u>
<input type="checkbox"/> Jury Instructions	<u> </u>
<input type="checkbox"/> Change of Plea	<u> </u>
<input type="checkbox"/> Sentencing	<u> </u>
<input type="checkbox"/> Bail hearing	<u> </u>
<input checked="" type="checkbox"/> Pretrial proceedings (specify) <u> </u>	<u>Status conference on 5/14/13; Status conference on 7/18/13</u>
<input type="checkbox"/> Testimony (specify) <u> </u>	<u> </u>
<input type="checkbox"/> Other (specify) <u> </u>	<u> </u>

NOTE: Any form that fails to specify in adequate detail those proceedings to be transcribed will be considered deficient.

B. ☒ **I certify that I have contacted the court reporter and the following financial arrangements for payment of the transcript have been made:**

- ☒ Private funds.
- ☐ Government expense (civil case). IFP status has been granted and a motion for transcript at government expense has been allowed. (Attach a copy of the order to each copy of this order form.)
- ☐ Criminal Justice Act. A CJA Form 24 has been approved by the district court judge.
- ☐ Criminal Justice Act. A CJA Form 24 is attached for authorization by the court of appeals.
- ☐ Federal Public Defender/Government Counsel - no CJA Form 24 necessary.

Filer's name J. Scott SextonFiler's Signature /s/ J. Scott SextonFirm/Address 10 Franklin Road, SE, Suite 800, Roanoke, VA 24011Filer's Email address sexton@gentrylocke.comTelephone number 540.983.9379Date mailed to court reporter August 22, 2013(Court Reporter Use ONLY) Date received

Certificate of Service

I hereby certify that on the 22nd day of August, 2013, the foregoing was filed through the ECF system which will send electronic notification to the registered participants identified on the Notice of Electronic Filing (NEF) and mailed, via U.S. Mail, to the following who do not receive NEF:

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